

DHSS/DAC Planning Project

Name: Data Evaluation and Enhancement

Introduction:

Accurate, meaningful, and timely data is critical to public health. Data drives public health interventions, identifying needs and measuring the success or need for re-evaluation of specific strategies or activities. Data is paramount to identifying a public health need or trend. Robust data is necessary to support funding requests as well as providing a voice to public health when speaking to the public, stakeholders and legislators.

Deficiency in data can negatively impact the public health system and society as a whole in numerous ways, including a lack of early recognition of increasing or emerging public health threats or health disparities as well as allow for politicizing or devoting resources to the wrong issues. Without robust public health data, there is an increased potential to mischaracterize the true scope of the problem, increasing the risk of poor health outcomes for those we serve and inevitably leading to a loss of credibility for the public health system and us as public health professionals.

Defining the Issues:

In order to ensure accurate, meaningful, and timely data is available in accessible forms to all public health professionals and the public, resources must be devoted to identifying what is needed and maintaining data availability.

To ensure resources are devoted to the most productive efforts, the Department of Health and Senior Services (DHSS) seeks to better understand the data needs of the Local Public Health Agencies (LPHA) by identifying the desired purpose and uses of data as well any pertinent timeframes or deadlines the LPHA has for the utilization of the data. Examples of a timeframe might be for preparation of a budget proposal to submit to a county commission or in preparation of a grant request. Better understanding the times of year and frequency in which specific data is most useful will be utilized to better inform DHSS data release schedules.

DHSS seeks to clarify by the public health data system the level of data desired by LPHAs (such as record level data, zip code, county, and region) and frequency schedule in which the data is most useful.

The need has been identified to ensure awareness of LPHAs of current level of data access, data analysis and extraction tools and training currently available from DHSS. In addition, it is necessary to identify opportunities to increase user friendliness of trainings and data tools with current resources as well as quantify what additional resources need to be acquired.

Conclusions

The importance of robust public health data is widely understood by public health practitioners. However, the usefulness and relevance of current available data available from the Missouri Department of Health and Senior Services is less well understood. This understanding is critical to the dedication of appropriate resources to ensure the most beneficial data products possible are accessible by the entire public health system. In addition, it is essential that each LPHA have access to the training and data set that best meets their needs.

Vision

- Robust, integrated data systems
- Universal, public health access to all levels of data
- Consistent and competent data analysis capacity (PH system-wide)
- Dedicated IT and data informatics staff.
- Focused, timely distribution of data/information to address immediate public health issues.
- Supportive legislature

Project Ideas

- 1 Continue to collect data
- 2 Enhance data collection efforts – NVDRS (National Violent Death Registration System)
- 3 Get off the “mainframe”
- 4 Pursue new position classifications for data technicians and informaticists
- 5 Seek funding for MOPHIMS (will replace MICA) and other systems proactively
- 6 Continue to engage partners to ensure data and reports are useful and relevant
- 7 Show the value of data and systems
- 8 Convert data into information

Next Steps

1. Review findings from the foundational services survey to develop guidance on next steps for this group.
2. Training on MOPHIMS to learn how to use the systems and access what is there.
3. Filling data gaps for agencies without epidemiologists
 - a. Identify the information the LPHAs need to articulate specific issues and needs for constituents and policymakers?
 - b. Identify the indicators needed by LPHAs
 - c. Help LPHAs learn how to customize their data to better share their message with key constituent groups.